

Fig. 1(Prior Art)

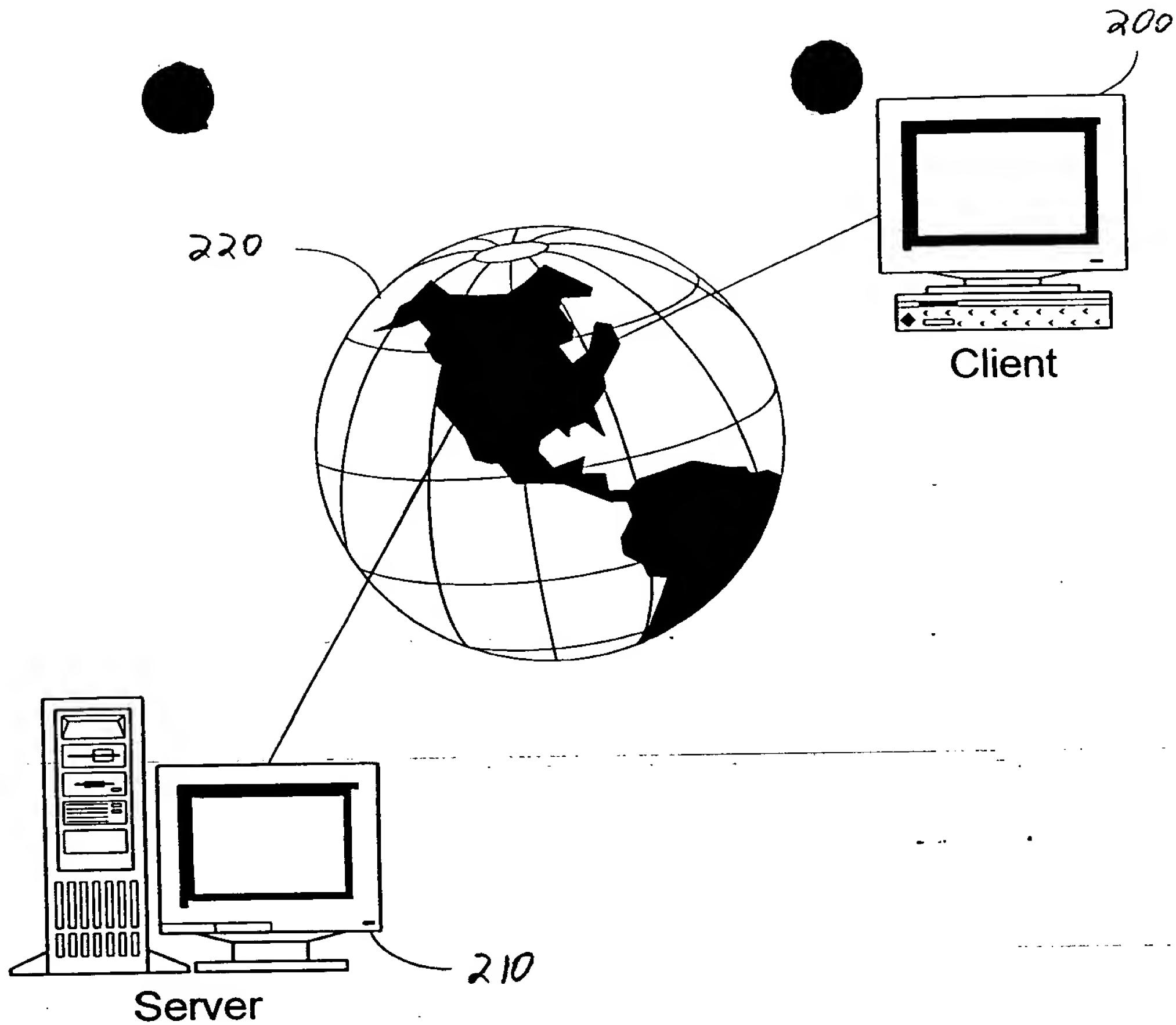


Fig. 2A

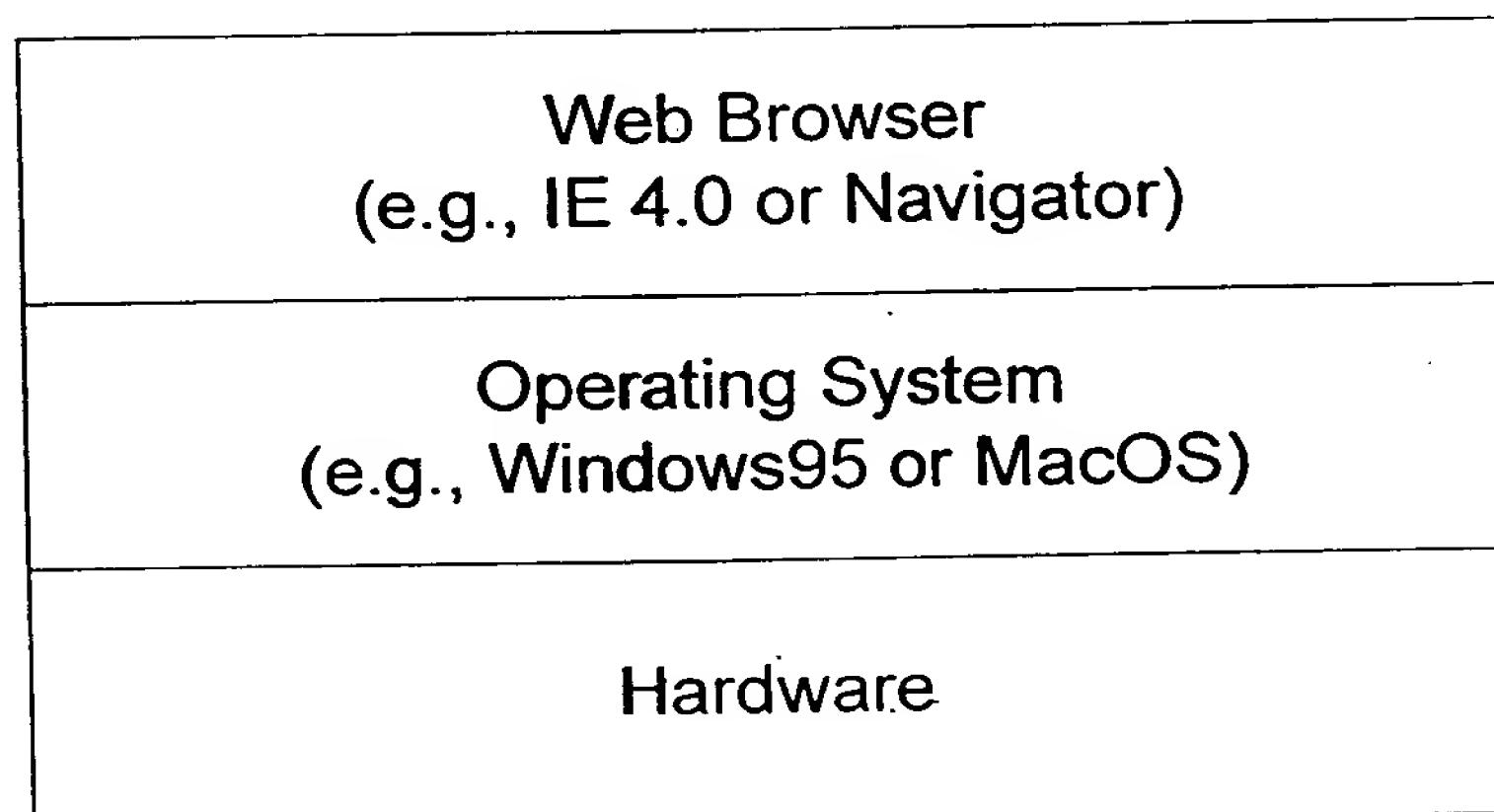


Fig. 2B

Process Starts

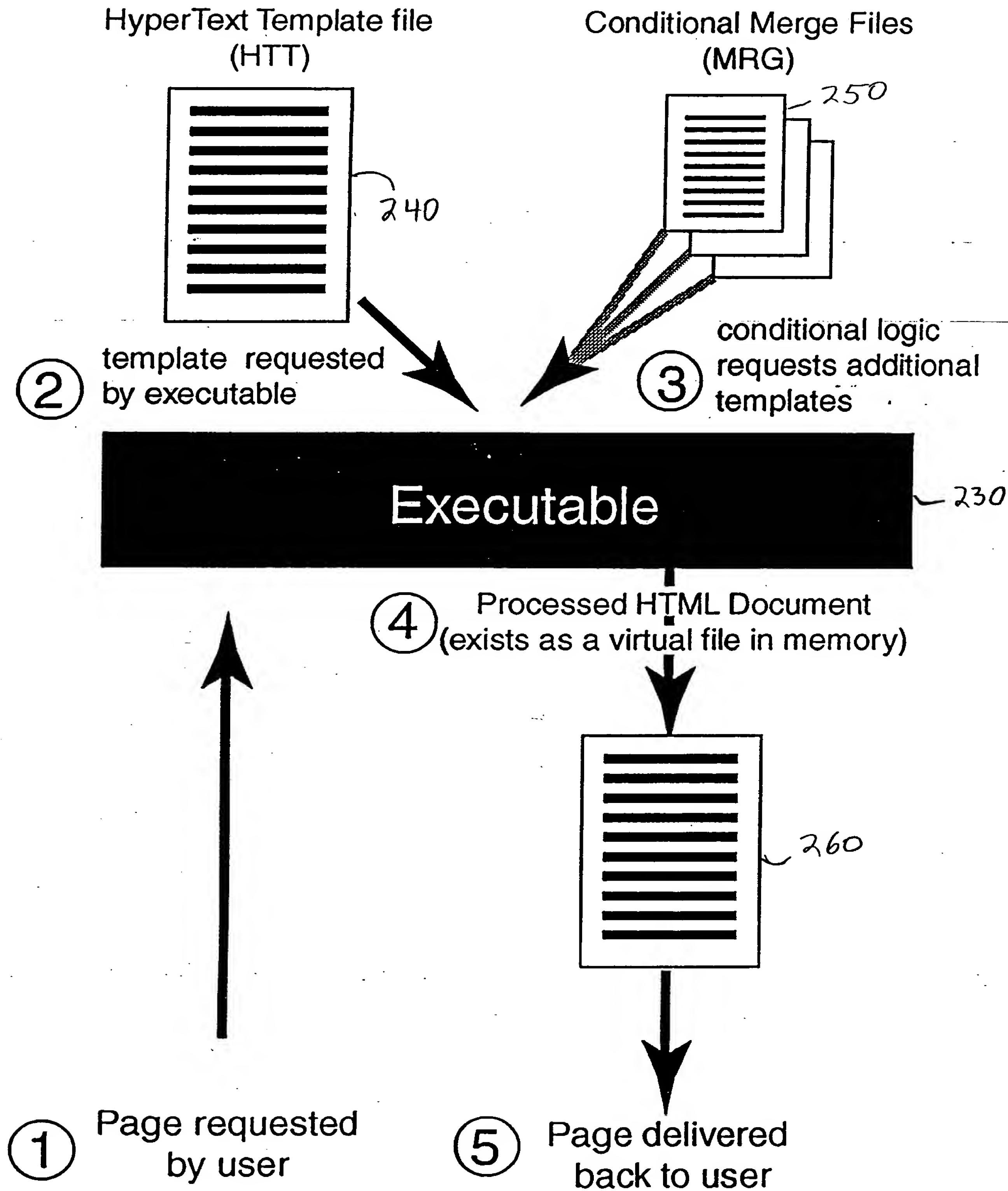


FIG. 2C

Process Repeats

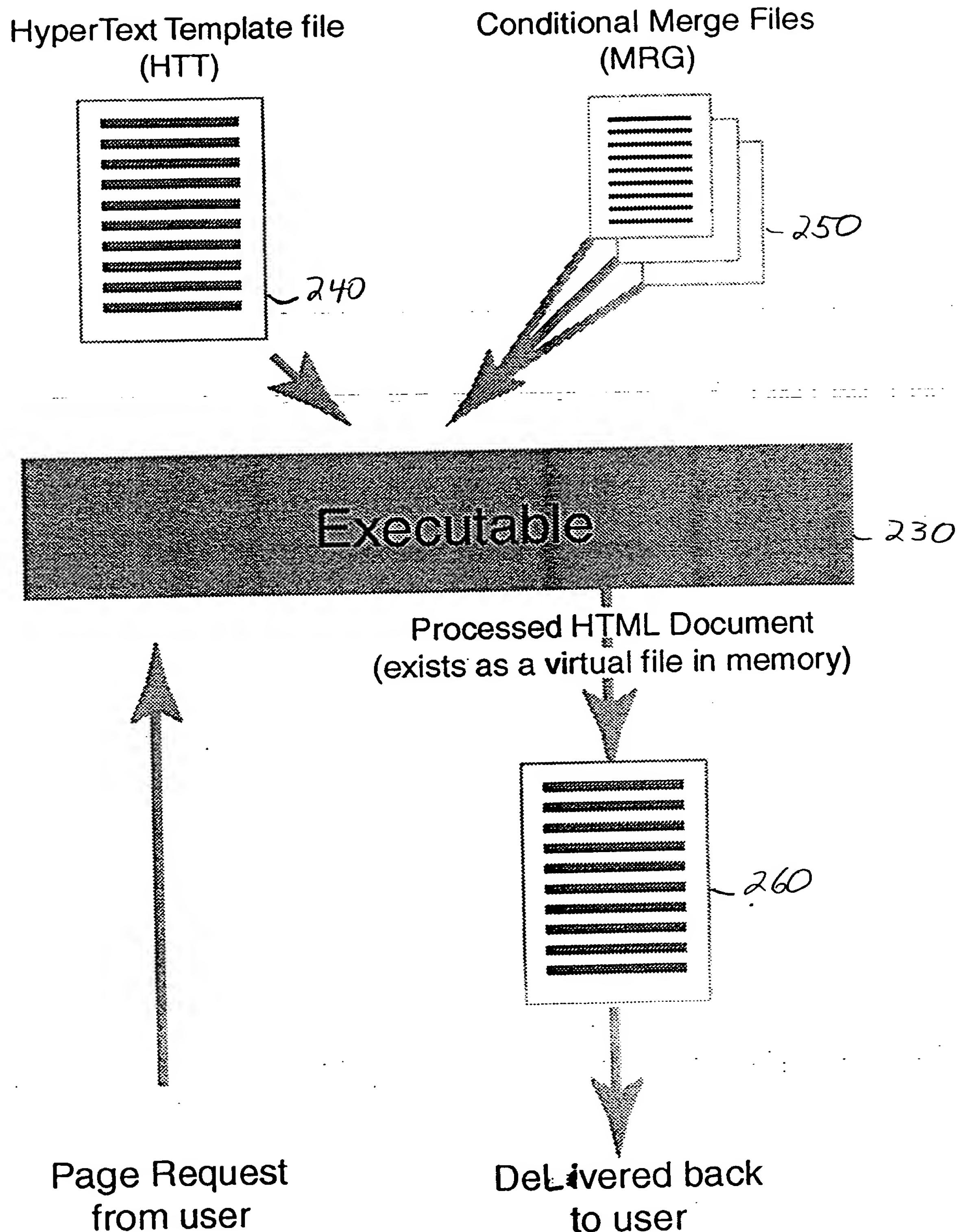


FIG. 2D

Fig. 3

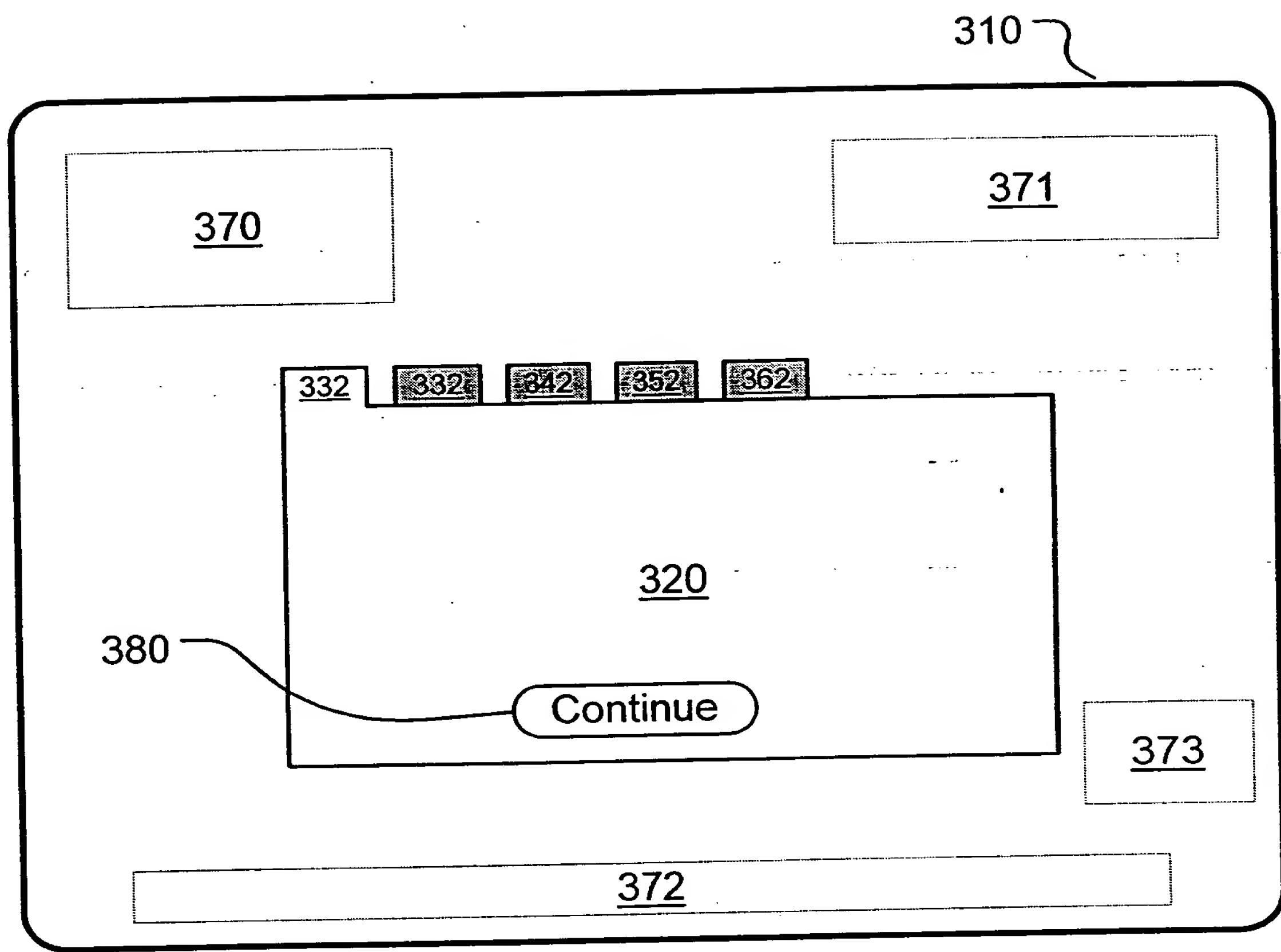


Fig. 4A

Fig 4A
Fig 4B

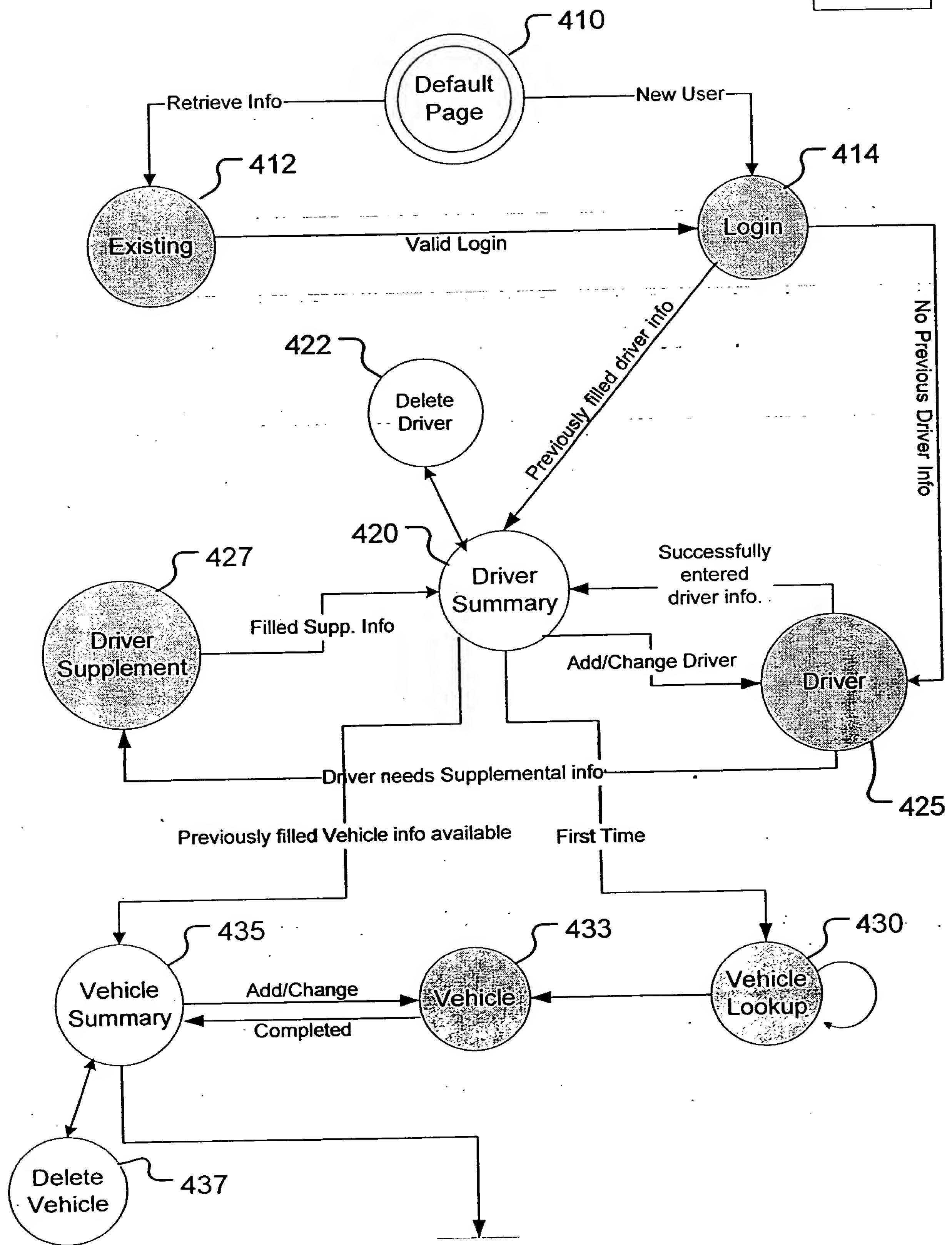


Fig. 4B

Fig 4A
Fig 4B

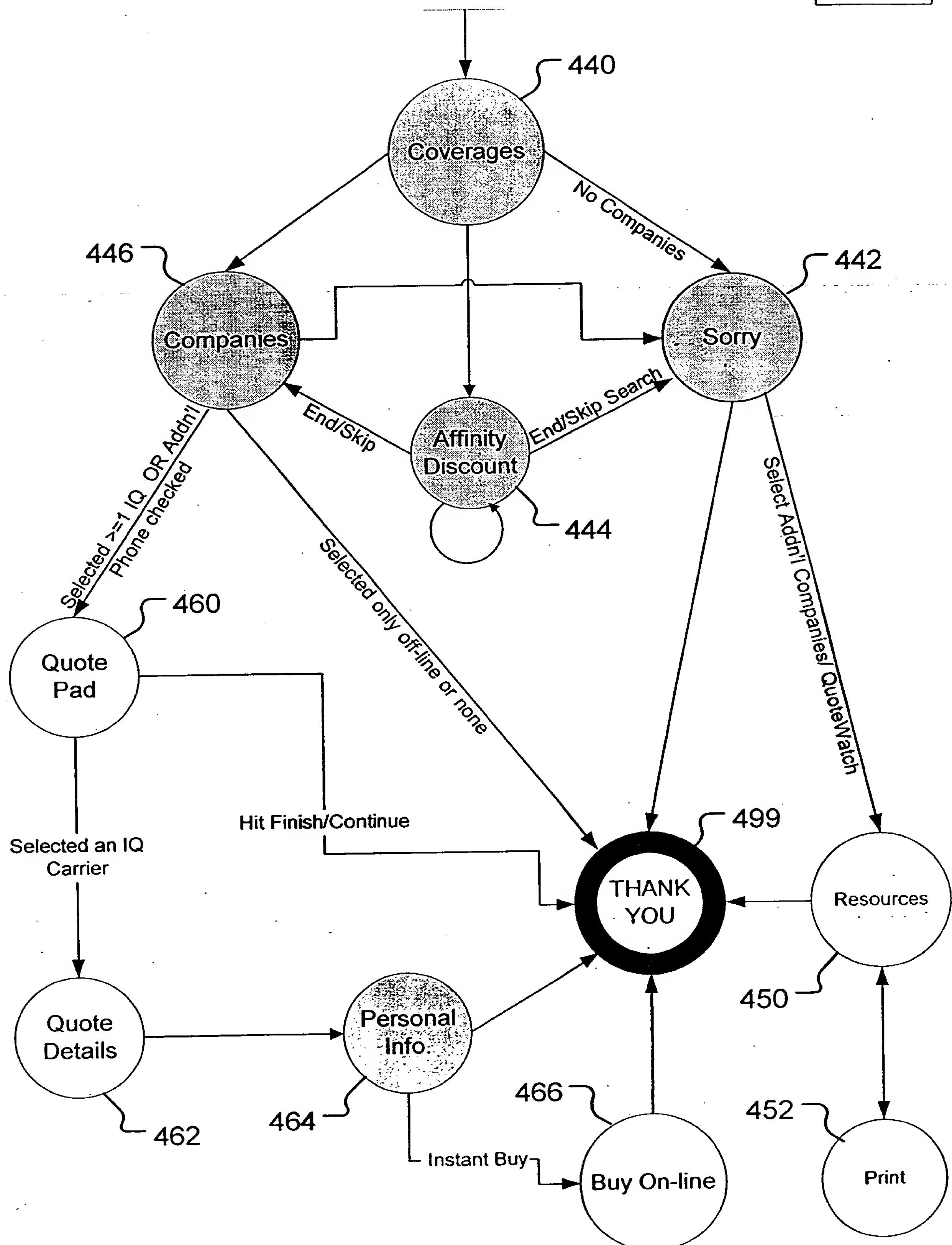


Fig. 5

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Auto Insurance

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• Simplify your Insurance Shopping
Fill out one form, one time.

• Compare Free Insurance Quotes
Discover how much you could save!

• Connect with Leading Companies
Choose the quote that is right for you.

Note:

- We currently offer quotes for private passenger autos and trucks only (no motorhomes or commercial autos).
- We also offer motorcycle insurance.
- Canadian user? [Click here](#)

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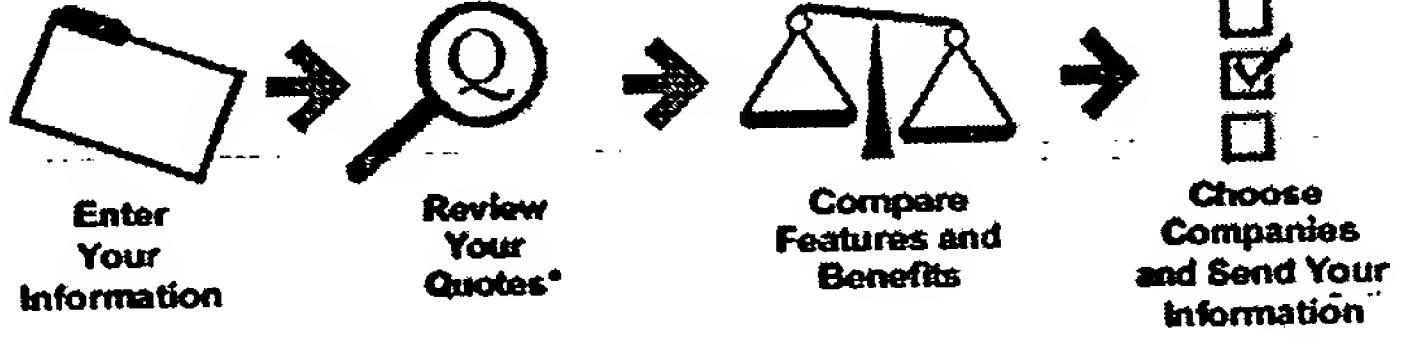
Fig. 6

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Start **State** Drivers Vehicles Usage Discounts Coverage Quotes

To shop for quotes, take 15-20 minutes to:



Enter Your Information Review Your Quotes* Compare Features and Benefits Choose Companies and Send Your Information

Note:

- Your current policy and vehicle registration can help you complete the process more quickly.
- We will prefill some answers using our own data sources or with information you've previously entered. You can change this information at any time.

To begin, answer the question below:

In which state would you like to insure your vehicle?

Check here to save your information

Continue

* Your personal information and the number of participating quoting companies in your state will determine how many quotes you receive.

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Fig. 7

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Start State Drivers Vehicles Usage Discounts Coverage Quotes

Driver #1 Info

Tip: Click on for question-specific help.

Personal Information

First Name:	Steve
Date of Birth:	MM DD YYYY 11 / 16 / 1958
Gender:	<input checked="" type="radio"/> M <input type="radio"/> F
Marital Status:	Married <input checked="" type="checkbox"/>
If Married or Separated, is your spouse a licensed driver? <input checked="" type="radio"/> Yes <input type="radio"/> No	

Residence Information

Residence State:	California
Do You Currently Rent or own your residence?	<input checked="" type="checkbox"/> Rent <input type="checkbox"/> Single Family Home
Which residence type best describes your home?	
How long have you lived at your current residence? (if less than a month, enter one month)	8 Yrs. 5 Mos.
How long did you live at your previous residence?	4 Yrs. 3 Mos.

Occupation Information

What is your occupation? (if retired, select previous occupation)	Engineer
Are you retired?	<input checked="" type="radio"/> Yes <input type="radio"/> No
How many years have you been in your present occupation or been retired?	5
Have you ever been in the active military service?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Are you a graduate of an accredited 2 or 4 yr. college or technical program?	<input checked="" type="radio"/> Yes <input type="radio"/> No

Driving History

How old were you, in years and months, when you first received your U.S. license?	18 Yrs 5 Mos.
In which state are you licensed to drive? (if you have an international license, select "International License Only")	California
Have you completed a defensive driver course in the last 3 years?	No
In the last 5 years, has your license been suspended/revoked?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Do you need to file a financial responsibility form (SR-22)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Have you been cited for any violations or involved in any accidents, regardless of fault, in the last 5 years, or experienced any losses in the last 5 years?	<input checked="" type="radio"/> Yes <input type="radio"/> No

Note: Driving records are verified with the state's Department of Motor Vehicles.

Household Information

How many people living in your household will not be listed as drivers on your policy? (maximum of 9 household members)	3
Have you filed for bankruptcy, had any lawsuits or judgments against you, or had adverse credit in the last 5 years?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Have you or any member of your household been convicted of a misdemeanor in the last 5 years, or a felony in the last 10 years?	<input checked="" type="radio"/> Yes <input type="radio"/> No
How many times has the primary wage earner of your household changed careers in the last 5 years?	2
What best describes the annual income of the highest wage earner in your household?	Select...

Check here to save your information

Comments

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Fig. 8

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Driver #2 Info

Tip: Click on for question-specific help.

Personal Information

First Name:	Jamie
Date of Birth:	MM DD YYYY 1 / 10 / 1960
Gender:	<input type="radio"/> M <input checked="" type="radio"/> F
Marital Status:	Married <input checked="" type="checkbox"/>

Residence Information

Residence State:	California
------------------	------------

Occupation Information

What is Driver's occupation? (if retired, select previous occupation)	Engineer
Is Driver retired?	<input type="radio"/> Yes <input checked="" type="radio"/> No
How many years has Driver been in their present occupation or been retired?	5
Has Driver ever been in the active military service?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Is Driver a graduate of an accredited 2 or 4 yr. college or technical program?	<input type="radio"/> Yes <input checked="" type="radio"/> No

Driving History

How old was Driver, in years and months, when they first received their U.S. license?	18 Yrs. 5 Mos.
In which state is Driver licensed to drive? (if Driver has an international license, select "International License Only")	California
Has Driver completed a defensive driver course in the last 3 years?	No
In the last 5 years, has Driver's license been suspended/revoked?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Does Driver need to file a financial responsibility form (SR-22)?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Has Driver been cited for any violations or involved in any accidents, regardless of fault, in the last 5 years, or experienced any losses in the last 5 years?	<input type="radio"/> Yes <input checked="" type="radio"/> No

Note: Driving records are verified with the state's Department of Motor Vehicles.

Household Information

What is Driver's relation to you?	Spouse
Is Driver a resident of your household?	<input checked="" type="radio"/> Yes <input type="radio"/> No

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Fig. 9

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Driver Summary

No.	Name	Date of Birth	Relationship	Licensed State	Residence State	Change	Delete
1	Steve	11/16/1958	Self	CA	CA	Change	(required)
2	Jamie	01/10/1960	Spouse	CA	CA	Change	Delete

Add Another Driver
Add any additional licensed drivers living in household

Check here to save your information

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Fig. 10

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Vehicle #1 Info

Vehicle Information:
1989 Toyota, Long Bed Deluxe 4WD [Change](#)

Purchase and Finance Information:

Date purchased/leased:	MM YYYY
03	/ 1992
Cost new (approximate):	\$17800 .00
Term length if financed or leased:	N/A - wholly owned: <input checked="" type="checkbox"/>

Registration Information:

Registered to:	Self
Registered state:	California
City where parked overnight (must be in CA):	San Jose
Zip Code where parked overnight (must be valid for City):	95131
Garage type:	Full Garage

Special Vehicle Considerations:
 Manufactured for use outside US; Considered a classic: Yes No
 Custom equipment modifications; Extensive unrepainted damage: Yes No
 Has vehicle ever been stolen:

Special Equipment:
 Canopy/Camper Tops; Custom Painting; Special Wheels/Rims;
 Stereo equipment over \$350; Custom Body Work; Yes No
 Van Modifications; Winch

Additional Equipment:

Security System:	Alarm Only <input checked="" type="checkbox"/>
4 wheel drive:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Anti-lock brakes:	All-wheel Anti-Lock <input checked="" type="checkbox"/>
Automatic seat belts:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Airbags:	Driver's and Passenger's Side Only <input checked="" type="checkbox"/>

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Fig. 11

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Vehicle Summary

No.	Year	Make	Model	Change	Delete
1	1999	ACURA	INTEGRA GS	Change	Delete

[Add Another Vehicle](#) [Add](#)

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Fig. 12

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Vehicle Usage

Driver/Vehicle Usage Table
Please select the percentage of time each vehicle is driven by each listed driver.

No.	Driver	Vehicle #1	Vehicle #2
		1989 Toyota	1992 Toyota
1	Steve	0 <input checked="" type="checkbox"/> %	0 <input checked="" type="checkbox"/> %
2	Jamie	0 <input checked="" type="checkbox"/> %	0 <input checked="" type="checkbox"/> %
Total:		100%	100%

Vehicle #1: 1989 Toyota, Long Bed Deluxe 4WD

HELP How many miles is the vehicle driven annually?	9320 <input type="text"/> miles
HELP What is the vehicle primarily used for?	Commute <input checked="" type="checkbox"/>
If Commute is selected above, please answer the following two questions.	
How many miles is the vehicle driven during one-way commute?	13 <input type="text"/> miles (one way)
How many days per week is the vehicle used for commuting?	5 <input type="text"/> days/week
HELP Is the 1989 Toyota used for delivery, hire, public livery, commercial registration, or as an emergency vehicle?	<input type="radio"/> Yes <input checked="" type="radio"/> No

Vehicle #2: 1992 Toyota, Corolla Deluxe 4WD

HELP How many miles is the vehicle driven annually?	9530 <input type="text"/> miles
HELP What is the vehicle primarily used for?	Commute <input checked="" type="checkbox"/>
If Commute is selected above, please answer the following two questions.	
How many miles is the vehicle driven during one-way commute?	15 <input type="text"/>
How many days per week is the vehicle used for commuting?	5 <input type="text"/> days/week
HELP Is the 1992 Toyota used for delivery, hire, public livery, commercial registration, or as an emergency vehicle?	<input type="radio"/> Yes <input checked="" type="radio"/> No

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Fig. 13

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> Vehicle Usage Continued

HELP Is the 1983 Toyota Used For:

Delivery:	<input type="radio"/> Yes <input checked="" type="radio"/> No
Hire:	<input type="radio"/> Yes <input checked="" type="radio"/> No
Public Livery:	<input type="radio"/> Yes <input checked="" type="radio"/> No
Commercial Registration:	<input type="radio"/> Yes <input checked="" type="radio"/> No
Emergency Vehicle:	<input type="radio"/> Yes <input checked="" type="radio"/> No

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Fig. 14

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> Additional Discount Info

Membership Groups
Your membership in various groups may qualify you for a discount. The amount and number of discounts that will be applied varies by company. Based on your state, the following groups may offer discounts. Please check all you are currently a member of.

Banks/Credit Unions/Credit Cards (check all that apply)

Credit Union for Public Employee Group POL/TEL Federal Credit Union
 Federal Express Credit Association Retirees Payroll Deduction
 GENTELCO Federal Credit Union Tri-Gentel Federal Credit Union

City/County/State (check all that apply)

AAA Ruralite Affiliate
 Harvest States Cooperative Tri-Gentel Federal Credit Union
 Inter-mountain Farmers Association (IFA)

Educational Institutions (check all that apply)

AAA Ruralite Affiliate
 Harvest States Cooperative Tri-Gentel Federal Credit Union
 Inter-mountain Farmers Association (IFA)

Employer Groups (check all that apply)

California Federation of Teachers Pacific Telecom
 Farmland Affiliates Employee Public Utilities Employee
 Farmland Industries Employee Retirees Payroll Deduction
 Federal Government Employee Widow/Retired Public Employee
 Nationwide Enterprise Employee

Professional Associations (check all that apply)

AAA Ruralite Affiliate
 Harvest States Cooperative Tri-Gentel Federal Credit Union
 Inter-mountain Farmers Association (IFA)

Other (check all that apply)

AAA Ruralite Affiliate
 Harvest States Cooperative Tri-Gentel Federal Credit Union
 Inter-mountain Farmers Association (IFA)

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Start | State | Drivers | Vehicles | Usage | coverage | Discounts | Quotes

Desired Coverage

To make your coverage selection easier, use CoverageAssistSM below. It will automatically fill in coverage amounts, based on the level that you select and the state you live in.



Hang in there. You're close to completing the quote form. Keep this Mercedes SUV in mind. It could be yours!

CoverageAssist™

Desired Coverage Level: Select...

Note: If you desire a different amount than what is prefilled in any coverage, you can change the amount below.

Coverage		Bodily Injury Liability:	<input type="button" value="Select..."/>
<input type="button" value="HELP"/>		Property Damage Liability:	<input type="button" value="Select..."/>
<input type="button" value="HELP"/>		Medical Payments:	<input type="button" value="Select..."/>
<input type="button" value="HELP"/>		Uninsured and Underinsured Motorist Bodily Injury: (cannot be higher than Bodily Injury Liability requested above)	<input type="button" value="Select..."/>
<input type="button" value="HELP"/>		Uninsured Motorist Property Damage Liability: (available only if Uninsured and Underinsured Motorist Bodily Injury is also selected)	<input type="button" value="Select..."/>

		Vehicle #1 1999 ACURA
<input type="button" value="HELP"/>	Comprehensive Deductible:	<input type="button" value="Select..."/>
<input type="button" value="HELP"/>	Collision Deductible: (Comprehensive Coverage is required for Collision Coverage)	<input type="button" value="Select..."/>
<input type="button" value="HELP"/>	Rental Reimbursement:	<input type="button" value="Select..."/>
<input type="button" value="HELP"/>	Waiver of Collision Deductible: (applies if you have an insured vehicle with Collision coverage)	<input type="button" value="Select..."/>
<input type="button" value="HELP"/>	Towing & Labor:	<input type="button" value="Select..."/>
<input type="button" value="HELP"/>	CB Radio:	<input type="button" value="Select..."/>

Coverage Start Date		MM	DD	YYYY
<input type="button" value="HELP"/>	Choose a desired effective date for this policy: (must be today's date or later)	<input type="text" value="03"/>	<input type="text" value="21"/>	<input type="text" value="2000"/>
Note: Coverage is not effective until you receive confirmation from the insurance carrier selected on the Quote Pad.				

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Fig. 16

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[Quoting Companies](#) These companies are prepared to offer you quotes.

• Uncheck the box in the "Quote Me" column if you do not want a quote from a particular company.
 • Select an agent from the drop-down box that may appear underneath a company to receive a quote.

Click on logo for company details	S&P Best AM Best	Quote Me
AARP Auto Insurance Program from The Hartford	AA/A+	<input checked="" type="checkbox"/>
Travelers Insurance Member of citigroup	NR/A+	<input checked="" type="checkbox"/>
CSE Insurance Group	N/A/A-	<input checked="" type="checkbox"/>
Nationwide Insurance	AA/A+	<input checked="" type="checkbox"/>
State Farm Insurance Companies Like a good neighbor, State Farm is there	AAA/A++	<input checked="" type="checkbox"/>
Select an agent from the list below to receive a quote from State Farm:		
Select...	<input type="button" value="▼"/>	
KEMPER INSURANCE COMPANIES	AA+	<input checked="" type="checkbox"/>
GE Financial Network	AAA-	<input checked="" type="checkbox"/>
Orion Auto	AA	<input checked="" type="checkbox"/>
FINANCIAL INDEMNITY COMPANY	N/A/A++	<input checked="" type="checkbox"/>
21st Century Insurance Company	A+/A	<input checked="" type="checkbox"/>
GMAC Insurance	Api/A+	<input checked="" type="checkbox"/>
RELIANCE NATIONAL	A/A-	<input checked="" type="checkbox"/>
EXPLORER Insurance Company	NR/A	<input checked="" type="checkbox"/>
CNA For All the Commitments You Make!	A/A+	<input checked="" type="checkbox"/>
RelianceDirect	A/A-	<input checked="" type="checkbox"/>

Fig. 17

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► Driver Summary
Attention! * indicates that data on this page is either missing, incorrect or requires update.
Click on * next to the entries below for detailed instructions.

No.	Name	Date of Birth	Relationship	Licensed State	Residence State	Change	Delete (required)
1	Steve	11/16/1958	Self	CA	CA	Change	Delete
2	Jamie	01/10/1960	Spouse	CA	CA	Change	Delete

Add Another Driver [Add](#)

► Add any additional licensed drivers living in household

Check here to save your information

[Continue](#)

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Fig. 18

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Vehicle Usage

Driver/Vehicle Usage Table
Please select the percentage of time each vehicle is driven by each listed driver.

1810	1810	No. Driver		Vehicle #1	Vehicle #2
		1	Steve	1989 Toyota	1992 Toyota
		1	70 %	0	
		2	Jamie	30 %	0
		Total:		100%	100%

Vehicle #1: 1989 Toyota Long Bed Deluxe 4WD

HELP	How many miles is the vehicle driven annually?	9320 miles
HELP	What is the vehicle primarily used for?	Commute
If Commute is selected above, please answer the following two questions.		
HELP	How many miles is the vehicle driven during one-way commute?	13 miles (one way)
HELP	How many days per week is the vehicle used for commuting?	5 days/week
HELP	Is the 1989 Toyota used for delivery, hire, public livery, commercial registration, or as an emergency vehicle?	<input type="radio"/> Yes <input checked="" type="radio"/> No

Vehicle #2: 1992 Toyota Corolla Deluxe 4WD

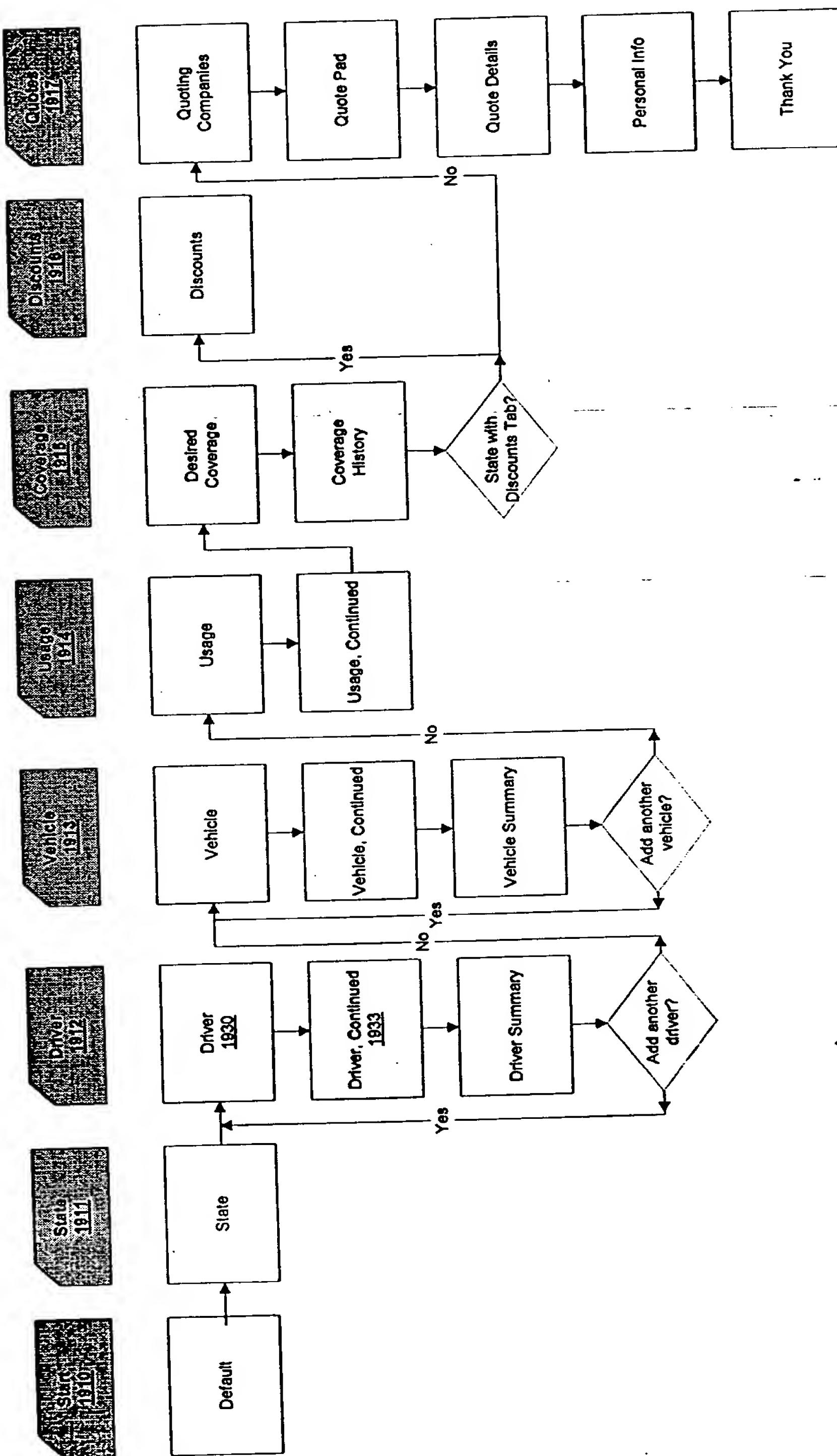
HELP	How many miles is the vehicle driven annually?	9530 miles
HELP	What is the vehicle primarily used for?	Commute
If Commute is selected above, please answer the following two questions.		
HELP	How many miles is the vehicle driven during one-way commute?	15
HELP	How many days per week is the vehicle used for commuting?	5 days/week
HELP	Is the 1992 Toyota used for delivery, hire, public livery, commercial registration, or as an emergency vehicle?	<input type="radio"/> Yes <input checked="" type="radio"/> No

Check here to save your information

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Fig. 19



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